

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 21, 2003 8:00 am**  
**Secretary of State**

08-21-2003 90109 024 \*\*\*150.00

<b>DOCUMENT #</b> P02000016334
<b>1. Entity Name</b> HOLLYWOOD DRYWALL SYSTEMS, INC.

**DO NOT WRITE IN THIS SPACE**

<b>2. Principal Place of Business</b> 6821 HOOD STREET Suite, Apt. #, etc.		<b>3. Mailing Address</b> Suite, Apt. #, etc.	
<b>City &amp; State</b> HOLLYWOOD, FL		<b>City &amp; State</b>	
<b>Zip</b> 33024	<b>Country</b>	<b>Zip</b>	<b>Country</b>

**DO NOT WRITE IN THIS SPACE**

<b>4. FEI Number</b> 01-0605395	<b>Applied For</b> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**DO NOT WRITE  
IN THIS SPACE**

<b>7. Name and Address of Current Registered Agent</b>	
<b>Name</b> MONTERO, MARY	
<b>Street Address (P.O. Box Number is Not Acceptable)</b> 6821 HOOD STREET	
<b>City</b> HOLLYWOOD	<b>Zip Code</b> 33024

**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE**

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**

**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**  
**Trust Fund Contribution.**

**10. OFFICERS AND DIRECTORS**

<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>PRESIDENT</b> GONZALEZ, JUAN L 6821 HOOD STREET HOLLYWOOD, FL 33024
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>VICE-PRESIDENT</b> MONTERO, MARY 6821 HOOD STREET HOLLYWOOD, FL 33024
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	

**11.**

<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>
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<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>

**DO NOT WRITE  
IN THIS SPACE**

**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

*Juan L. Gonzalez*  
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**Date**

**Daytime Phone #**

*8/19/03*  
*684-295-9479*

**Hollywood Drywall  
Systems, Inc.**

6821 Hood Street  
Hollywood, FL 33024  
Tel# (786) 295-9479

ATTACHMENT  
# P02000016334  
80139577

August 7, 2003

Florida Department of State  
Division of Corporation  
Uniform Business Report Filings

P.O. Box 1500  
Tallahassee, FL 32302-1500

Ref: Uniform Business Report  
P02000016334  
2003 UBR

Dear Sir or Madam:

Enclosed please find a check in the amount of \$150.00 for my 2003 Uniform Business Report. We really sorry but We never received the original. Please accept this filling and wave any late charges. Thank you.

Sincerely,

*Juan Luis J.*

Juan L. Gonzalez  
President